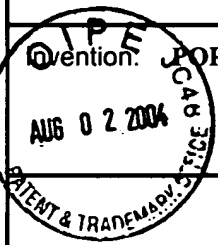
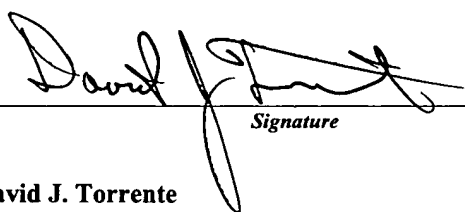
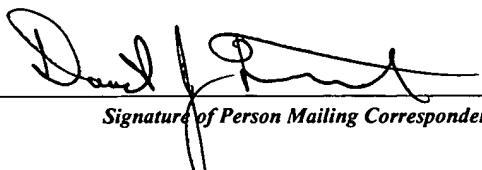



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>14318</b>	
Applicant(s): <b>Kiyoko Karusawa</b>					
Application No. <b>09/782,905</b>	Filing Date <b>February 14, 2001</b>	Examiner <b>Eugene Yun</b>	Customer No. <b>23389</b>	Group Art Unit <b>2682</b>	Confirmation No. <b>3208</b>
<div style="float: left; width: 15%; text-align: center;">  </div> <div style="float: right; width: 85%;"> <b>Convention: PORTABLE TELEPHONE WITH ORIGINATOR ACKNOWLEDGE FUNCTION</b> </div>					
COMMISSIONER FOR PATENTS:			<div style="font-size: 2em; font-weight: bold;">RECEIVED</div> <div style="font-weight: bold;">AUG 06 2004</div>		
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED			<b>Technology Center 2600</b>		
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	5 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> No additional fee is required for amendment.  <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____  <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>19-1013/SSMP</b>  <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.  <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="width: 35%; text-align: right;"> Dated: <b>July 29, 2004</b> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">   <div style="text-align: center;">Signature</div> </div> <div style="width: 50%;"> <div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on  <b>7/29/2004</b> with the U.S. Postal Service as first  class mail under 37 C.F.R. 1.8 and is addressed to the  Commissioner for Patents, P.O. Box 1450, Alexandria, VA  22313-1450. </div> <div style="text-align: center;">   Signature of Person Mailing Correspondence  <b>David J. Torrente</b>  Typed or Printed Name of Person Mailing Correspondence </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>David J. Torrente</b>  Registration No.: 49,099  Scully, Scott, Murphy &amp; Presser  400 Garden City Plaza  Garden City, NY 11530  (516) 742-4343 </div> <div style="width: 50%;"> CC: </div> </div>					

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): Kiyoko Karusawa	Docket No. 14318
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Application No. 09/782,905	Filing Date February 14, 2001	Examiner Eugene Yun	Customer No. 23389	Group Art Unit 2682	Confirmation No. 3208
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Inventor: **PORTABLE TELEPHONE WITH ORIGINATOR ACKNOWLEDGE FUNCTION**



**COMMISSIONER FOR PATENTS:**

**RECEIVED**

**AUG 06 2004**

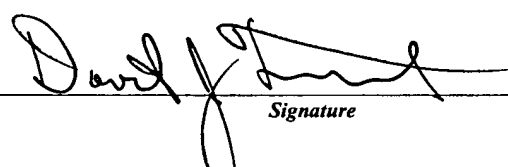
**Technology Center 2600**

Transmitted herewith is an amendment in the above-identified application.  
 The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST # PREV. PAID FOR		NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	5	-	20	=	0	x \$18.00	\$0.00
INDEP. CLAIMS	1	-	3	=	0	x \$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>							\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT							\$0.00

☒ No additional fee is required for amendment.  
☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.  
☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP

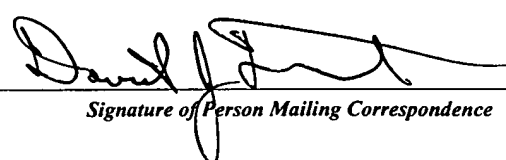
☒ Any additional filing fees required under 37 C.F.R. 1.16.  
☒ Any patent application processing fees under 37 CFR 1.17.

  
 \_\_\_\_\_  
 Signature

Dated: July 29, 2004

**David J. Torrente**  
 Registration No.: 49,099  
 Scully, Scott, Murphy & Presser  
 400 Garden City Plaza  
 Garden City, NY 11530  
 (516) 742-4343

I certify that this document and fee is being deposited on 7/29/2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
 \_\_\_\_\_  
 Signature of Person Mailing Correspondence

**David J. Torrente**

Typed or Printed Name of Person Mailing Correspondence

cc: